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CONFIRMATION NO. 6783

<b>SERIAL NUMBER</b> 10/705,973	<b>FILING OR 371(c) DATE</b> 11/13/2003 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2617	<b>ATTORNEY DOCKET NO.</b> 061715-0381	
<b>APPLICANTS</b> Hemant M. Chaskar, Woburn, MA; Dirk Trossen, Cambridge, MA;					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/426,385 11/15/2002					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/27/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>[Signature]</i> <i>[Initials]</i>		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 51	<b>INDEPENDENT CLAIMS</b> 25
<b>ADDRESS</b> 27433					
<b>TITLE</b> Smart inter-technology handover control					
<b>FILING FEE RECEIVED</b> 3220	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		